



CHAMPION
LABORATORIES,
INC.

RECEIVED

Luber-finer.

February 18, 1994

DEC 12 1994

U. S. EPA, REGION V
SWB - PMS

CHAMPION Laboratories
0470055001
Edwards-Co
Ken Carr

IEPA
2200 Churchill Road
P.O. Box 19276
Springfield, IL. 62794-9276

RECEIVED
WMD RECORD CENTER

To whom it may concern:

DEC 22 1994

Luber-finer, Inc. has merged with Champion Laboratories and now will be known as Champion Laboratories, Inc. This change was made to simplify our inter-company logistics and reduce unnecessary expenses. Therefore, please make the necessary arrangements to change the name of:

Luber-finer, Inc.
South 4th Street
Albion, IL 62806

USEPA# ILD099666935
IEPA# 0470055001
Air Permit# 047005AAG

To: Champion Laboratories, Inc.
301 Industrial Drive
Albion, IL 62806-1313

Contact: Mary K. Smerdon, Environmental Administrator
Champion Laboratories, Inc.
200 South Fourth Street
Albion, IL 62806-1313
Tel# (618)445-6011

Sincerely,

Mary K. Smerdon

Mary K. Smerdon
Environmental Administrator



200 S 4th ST

ALBION IL 62806-1313

618-445-6011

FAX 618-445-4040

12/16/94
notification
requested

JFF



State of Illinois

ENVIRONMENTAL PROTECTION AGENCY

file

Mary A. Gade, Director

2200 Churchill Road, Springfield, IL 62794-9276

217/785-8604

June 9, 1994

USEPA -- Region 5
Information Management Section
Attn: Sharon Kiddon HRM-7J
77 West Jackson Boulevard
Chicago, Illinois 60604-3590

RECEIVED

JUN 14 1994

OFFICE OF RCRA
WASTE MANAGEMENT DIVISION
EPA, REGION V

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WMD RECORD CENTER

SEP 20 1994

Dear Ms. Kiddon:

I am submitting the following name changes for entry into RCRIS. This information was obtained during RCRA inspections conducted by IEPA during the third quarter of FY 1994.

EPA ID #

ILD005100821 **CHANGE NAME FROM:** HIGHLAND PARK MILLWORK, INC. *already changed*
TO: HPM

ILD982606477 **CHANGE NAME FROM:** ILLINOIS BUREAU OF MATERIALS *already changed*
TO: ILDOT PROJECT IMPLEMENTATION

ILD005187422 **CHANGE NAME FROM:** SOMERVILLE, E.J.
TO: BERLAND, LAWRENCE - *changed in RCRIS 8/1/94*

ILD099666935 **CHANGE NAME FROM:** LUBER FINER
TO: CHAMPION - *changed in RCRIS 8/1/94*

ILD025649344 **CHANGE NAME FROM:** HILAND AUTO SALES
TO: HILAND TOYOTA *changed in RCRIS 8/1/94*

ILD004959433 **CHANGE NAME FROM:** POLYCHROME CHEMICALS
TO: REICHOLD CHEMICALS - *changed in RCRIS 8/1/94*

I have enclosed copies of the latest inspection reports for the sites.

Please contact me when these changes have been made in RCRIS. I have not received confirmation from my last letter sent to you in April.

If you have any questions concerning the above information,
please call.

Sincerely,

Jan Hopper

Jan Hopper
Field Operations Section
Division of Land Pollution Control
Bureau of Land

JEH:jeh

Attachments

Illinois Environmental Protection Agency
Division of Land Pollution Control

RCRA INSPECTION REPORT

USEPA #: IL <u>D 0 9 9 6 6 6 9 3 5</u>	IEPA #: <u>0 4 7 0 0 5 5 0 0 1</u>
Facility Name: <u>Champion (Luber Finer)</u>	Phone #: <u>618 / 445-2395</u>
Street Address: <u>301 Industrial Drive (54th St)</u>	County: <u>Edwards</u>
City: <u>Albion</u>	State: <u>Illinois</u> Zip: <u>62806</u>
Region: <u>7</u>	Inspection Date: <u>04/07/94</u> From: <u>10:00A</u> To: <u>12:00</u>
Weather: <u>Clear 55°F</u>	

TYPE OF FACILITY

Notified As: <u>Gen-1</u>	Regulated As: <u>Gen-1</u>
LDF? <u>no</u> HPV? <u>no</u> <small>(Yes or No)</small>	90-Day F/U Required?: YES <u> </u> NO <u>X</u>

TYPE OF INSPECTION

CEI: <u>X</u>	Sampling: <u> </u>	Citizen Complaint: <u> </u>	Closed: <u> </u>	Other: <u> </u>
CME/O&M: <u> </u>	Record Review: <u> </u>	Follow-Up to Inspection of: <u> </u>	Withdrawal: <u> </u>	

NON-REGULATED STATUS

SQG: <u> </u>	Claimed Nonhandler: <u> </u>	Other (Specify in Narrative): <u> </u>
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PART A

Notification Date: <u>10 / 03 / 85</u> , from <u>(initial)</u> or (subsequent) Notification.	
Initial Part A Date: <u> </u> / <u> </u> / <u> </u>	Amended: <u> </u> / <u> </u> / <u> </u>
Part A Withdrawal requested: <u> </u> / <u> </u> / <u> </u>	Approved by (US)(IL) EPA: <u> </u> / <u> </u> / <u> </u>

PART B PERMIT APPLICATION

Part B Permit Submitted: Y or <u>(N)</u> <u> </u> / <u> </u> / <u> </u>	Final Permit Issued: <u> </u> / <u> </u> / <u> </u>
--	--

ENFORCEMENT

Has the firm been referred to --	USEPA: Y or <u>(N)</u> <u> </u> / <u> </u> / <u> </u>
Illinois Attorney General: Y or <u>(N)</u> <u> </u> / <u> </u> / <u> </u>	County State's Attorney: Y or <u>(N)</u> <u> </u> / <u> </u> / <u> </u>

ORDERS ISSUED

CACO: <u> </u> / <u> </u> / <u> </u>	CAFO: <u> </u> / <u> </u> / <u> </u>	Consent Decree: <u> </u> / <u> </u> / <u> </u>
Federal Court Order: <u> </u> / <u> </u> / <u> </u>	State Court Order: <u> </u> / <u> </u> / <u> </u>	IPCB Order: <u> </u> / <u> </u> / <u> </u>

TSD FACILITY ACTIVITY SUMMARY

Activity by Process Code	On Part A?	Activity Conducted Prior to 1980?	Was Activity Ever Done?	Closed	Being done at Time of Insp.?	Exempt per 35 IAC, Sec.	On Annual Report		
							19	19	19
<u>none</u>									

RECEIVED
MAY 13 1994
IEPA-DLPC

U.S. ENVIRONMENTAL PROTECTION AGENCY
NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).

I. INSTALLATION'S EPA I.D. NO.

II. NAME OF INSTALLATION

III. INSTALLATION MAILING ADDRESS

IV. LOCATION OF INSTALLATION

PLEASE PLACE LABEL IN THIS SPACE

OCT 3 1985

SWB - A/S
U.S. EPA REGION V

FOR OFFICIAL USE ONLY

COMMENTS

INSTALLATION'S EPA I.D. NUMBER

APPROVED

DATE RECEIVED (yr., mo., & day)

F 1 L D 0 9 9 6 6 6 9 3 5

A

85/10/03

I. NAME OF INSTALLATION

LUBER-FINER, INC.

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX

3 S 4TH STREET

CITY OR TOWN

ST.

ZIP CODE

4 ALBION

IL 62806

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER

5 SAME S 4TH ST

CITY OR TOWN

ST.

ZIP CODE

6 ALBION

IL 62806

IV. INSTALLATION CONTACT

NAME AND TITLE (last, first, & job title)

PHONE NO. (area code & no.)

2 BAUMGART RICHARD CHEMIST

618-456-8831

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER

8 LUBER-FINER, INC.

B. TYPE OF OWNERSHIP (enter the appropriate letter into box)

VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))

F - FEDERAL
M - NON-FEDERAL

P

☒ A. GENERATION☐ B. TRANSPORTATION (complete item VII)☐ C. TREAT/STORE/DISPOSE☐ D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))

☐ A. AIR☐ B. RAIL☐ C. HIGHWAY☐ D. WATER☐ E. OTHER (specify):

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA I.D. Number in the space provided below.

☒ A. FIRST NOTIFICATION☐ B. SUBSEQUENT NOTIFICATION (complete item C)

C. INSTALLATION'S EPA I.D. NO.

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

	1		2		3		4		5		6	
	FOOI											
	25 - 26		27 - 28		29 - 30		31 - 32		33 - 34		35 - 36	
	7		8		9		10		11		12	
	25 - 26		27 - 28		29 - 30		31 - 32		33 - 34		35 - 36	

12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	32
33	34	35	36	37	38	39
40	41	42	43	44	45	46
47	48	49	50	51	52	53
54	55	56	57	58	59	60
61	62	63	64	65	66	67
68	69	70	71	72	73	74
75	76	77	78	79	80	81
82	83	84	85	86	87	88
89	90	91	92	93	94	95
96	97	98	99	100	101	102
103	104	105	106	107	108	109
110	111	112	113	114	115	116
117	118	119	120	121	122	123
124	125	126	127	128	129	130
131	132	133	134	135	136	137
138	139	140	141	142	143	144
145	146	147	148	149	150	151
152	153	154	155	156	157	158
159	160	161	162	163	164	165
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180	181	182	183	184	185	186
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208	209	210	211	212	213	214
215	216	217	218	219	220	221
222	223	224	225	226	227	228
229	230	231	232	233	234	235
236	237	238	239	240	241	242
243	244	245	246	247	248	249
250	251	252	253	254	255	256
257	258	259	260	261	262	263
264	265	266	267	268	269	270
271	272	273	274	275	276	277
278	279	280	281	282	283	284
285	286	287	288	289	290	291
292	293	294	295	296	297	298
299	300	301	302	303	304	305
306	307	308	309	310	311	312
313	314	315	316	317	318	319
320	321	322	323	324	325	326
327	328	329	330	331	332	333
334	335	336	337	338	339	340
341	342	343	344	345	346	347
348	349	350	351	352	353	354
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390	391	392	393	394	395	396
397	398	399	400	401	402	403
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411	412	413	414	415	416	417
418	419	420	421	422	423	424
425	426	427	428	429		

31	32	33	34	35	36
37	38	39	40	41	42
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55	56	57	58	59	60
61	62	63	64	65	66
67	68	69	70	71	72
73	74	75	76	77	78
79	80	81	82	83	84
85	86	87	88	89	90
91	92	93	94	95	96
97	98	99	100	101	102
103	104	105	106	107	108
109	110	111	112	113	114
115	116	117	118	119	120
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133	134	135	136	137	138
139	140	141	142	143	144
145	146	147	148	149	150
151	152	153	154	155	156
157	158	159	160	161	162
163	164	165	166	167	168
169	170	171	172	173	174
175	176	177	178	179	180
181	182	183	184	185	186
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193	194	195	196	197	198
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205	206	207	208	209	210
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217	218	219	220	221	222
223	224	225	226	227	228
229	230	231	232	233	234
235	236	237	238	239	240
241	242	243	244	245	246
247	248	249	250	251	252
253	254	255	256	257	258
259	260	261	262	263	264
265	266	267	268	269	270
271	272	273	274	275	276
277	278	279	280	281	282
283	284	285	286	28	

[illegible]

☐ 1. IGNITABLE (D001) ☒ 2. CORROSIVE (D002) ☐ 3. REACTIVE (D003) ☒ 4. TOXIC (D004)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

DATE SIGNED

EPA U.S. ENVIRONMENTAL PROTECTION AGENCY NOTIFICATION OF HAZARDOUS WASTE ACTIVITY		INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).	
I. NAME OF INSTALLATION NPO		PLEASE PLACE LABEL IN THIS SPACE OCT 3 1985 SWB - A/S U.S. EPA REGION V	
II. INSTALLATION MAILING ADDRESS			
III. LOCATION OF INSTALLATION			
FOR OFFICIAL USE ONLY			
COMMENTS			
INSTALLATION'S EPA I.D. NUMBER			
APPROVED			
DATE RECEIVED (yr., mo., & day)			
I. NAME OF INSTALLATION			
II. INSTALLATION MAILING ADDRESS			
STREET OR P.O. BOX			
CITY OR TOWN			
ST.			
ZIP CODE			
III. LOCATION OF INSTALLATION			
STREET OR ROUTE NUMBER			
CITY OR TOWN			
ST.			
ZIP CODE			
IV. INSTALLATION CONTACT			
NAME AND TITLE (last, first, & job title)			
PHONE NO. (area code & no.)			
V. OWNERSHIP			
A. NAME OF INSTALLATION'S LEGAL OWNER			
B. TYPE OF OWNERSHIP (enter the appropriate letter into box)			
VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))			
VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))			
VIII. FIRST OR SUBSEQUENT NOTIFICATION			
IX. DESCRIPTION OF HAZARDOUS WASTES			

IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1 FOO1	2	3	4	5	6
7	8	9	10	11	12

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54
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E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

☐ 1. IGNITABLE
(D001)

☒ 2. CORROSIVE
(D002)

☐ 3. REACTIVE
(D003)

☒ 4. TOXIC
(D004)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE

Albert J. Yelling

NAME & OFFICIAL TITLE (type or print)

ALBERT J. YELLING
PLANT MANAGER

DATE SIGNED

9/30/85

15 DEC 1988

5HR-12

Ms. Mary K. Smerdon
Luber Finer Inc.
105 East Walnut
Albion, Illinois 62806

Re: Land Disposal Restrictions
Luber Finer Inc.
ILD 099 666 935

Dear Ms. Smerdon:

On October 25, 1988, the Illinois Environmental Protection Agency (IEPA), representing the U.S. Environmental Protection Agency, conducted a Resource Conservation and Recovery Act (RCRA) inspection of the above-referenced facility. The purpose of the inspection was to determine the facility's compliance with the applicable hazardous waste management requirements of RCRA, including the Federal land disposal restrictions. The land disposal restrictions for F001-F005 spent solvents became effective on November 8, 1986, (40 CFR Part 268 and revisions to 40 CFR Parts 260-265 and 270-271) and for "California List" hazardous wastes on July 8, 1987, (52 Federal Register 25760: revisions to 40 CFR Parts 262, 264, 265, 268, and 270-271).

With respect to the land disposal restrictions section of the inspection, your facility was found to be in compliance with the requirements. A copy of the inspection report is enclosed for your records.

If you have any questions regarding this correspondence, please contact Ms. Gertrud Matuschkovitz of my staff at (312) 353-7921.

Sincerely yours,

Paul E. Dimock, Chief
IL/MI/WI Enforcement Program Section

Enclosure

cc: Harry Chappel, IEPA
Glen Savage, IEPA

RCRA ENFORCE- MENT	REG STAFF	REP SECTION CHIEF	REP CHIEF
INIT. DATE	12/14/88 O.R.	12/13/88 JIM	12-14-88 RB, acting

F.O.S.

RCRA LAND DISPOSAL RESTRICTION INSPECTION

Facility: Luber-Finer Div. of Champion Labs.

U.S. EPA I.D. No.: ILD099666 935 IEPA# 0670055001

Street: 105 East Walnut

City: Albion State: Illinois Zip Code: 62806

Telephone: (618) 445-3686

Operator: Same

Street: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____

Owner: Champion Laboratories, Inc.

Street: 105 East Walnut

City: Albion State: Illinois Zip Code: 62806

Telephone: (618) 445-3686

Inspection Date: 10/25/88 Time: 1:40P-2:45P Weather Conditions: Sunny, 60°, dry

	<u>Name</u>	<u>Affiliation</u>	<u>Telephone</u>
Inspectors:	<u>Gerald Steele</u>	<u>IEPA</u>	<u>(618) 997-4371</u>
	<u>Tom Edmondson</u>	<u>IEPA</u>	<u>(618) 997-4371</u>

Facility Representatives: Mary K. Smerdon (618) 445-3686
Al. Yelling (618) 445-3686

	<u>RCRA Status</u>	<u>F-Solvent</u>	<u>LDR Status</u> <u>California List</u>
Generator	<u>Yes</u>	<u>-</u>	<u>Yes</u>
Transporter	<u>-</u>	<u>-</u>	<u>-</u>
Treater	<u>-</u>	<u>-</u>	<u>-</u>
Storer	<u>-</u>	<u>-</u>	<u>-</u>
Disposer	<u>-</u>	<u>-</u>	<u>-</u>

RECEIVED
NOV 17 1988
IEPA/DLPC

RCRA LAND DISPOSAL RESTRICTION INSPECTION

APPLICABILITY CHECKLIST

Does the facility handle the following wastes?

No F-wastes handled

		Gen.	Treat	Store	Disp.	Trans.
A.	<u>F-Solvent Wastes</u>					
1.	F001	_____	_____	_____	_____	_____
2.	F002	_____	_____	_____	_____	_____
3.	F003	_____	_____	_____	_____	_____
4.	F004	_____	_____	_____	_____	_____
5.	F005	_____	_____	_____	_____	_____

Note: Use Appendix A to determine whether the facility is misclassifying any of its wastes.

B. California List Wastes

1. Liquid hazardous waste (including free liquids associated with any solid or sludge) that contains the following metals at concentrations greater than or equal to those specified

		Gen.	Treat	Store	Disp.	Trans.
Arsenic	500 mg/L	_____	_____	_____	_____	_____
Cadmium	100 mg/L	_____	_____	_____	_____	_____
Chromium VI	500 mg/L	_____ <i>(63 ppm)</i>	_____	_____	_____	_____
Lead	500 mg/L	_____ <i>(141 ppm)</i>	_____	_____	_____	_____
Mercury	20 mg/L	_____	_____	_____	_____	_____
Nickel	134 mg/L	_____	_____	_____	_____	_____
Selenium	100 mg/L	_____	_____	_____	_____	_____
Thallium	130 mg/L	_____	_____	_____	_____	_____

2. Liquid hazardous waste (including free liquids associated with any solid or sludge) that contains free cyanides at concentrations greater than or equal to 1,000 mg/L *Free cyanides less than 1000 mg/L*

Gen.	Treat	Store	Disp.	Trans.
<u>—</u>	<u>—</u>	<u>—</u>	<u>—</u>	<u>—</u>

3. Liquid hazardous waste that has a pH of less than or equal to 2.0

<u>X</u>	<u>—</u>	<u>—</u>	<u>—</u>	<u>—</u>
----------	----------	----------	----------	----------

pH = 1.4

4. Liquid hazardous waste that contains PCBs at concentrations greater than or equal to *No PCBs*

50 ppm <u>—</u>	<u>—</u>	<u>—</u>	<u>—</u>	<u>—</u>
-----------------	----------	----------	----------	----------

500 ppm <u>—</u>	<u>—</u>	<u>—</u>	<u>—</u>	<u>—</u>
------------------	----------	----------	----------	----------

Does the facility mix liquid hazardous waste that contains PCBs with other types of wastes?

— Yes — No — NA

If yes, state reasons for mixing:

5. Liquid hazardous waste that is primarily water and that contains HOCs greater than or equal to 1,000 mg/L (dilute HOC wastewater) and less than 10,000 mg/L *Not involved here*

<u>—</u>	<u>—</u>	<u>—</u>	<u>—</u>	<u>—</u>
----------	----------	----------	----------	----------

Note: The prohibitions of 268.32(a)(3) and (e) do not apply if the HOC waste is also subject to the solvent restrictions of 268 Subpart C or a specific HOC.

RCRA LAND DISPOSAL RESTRICTION INSPECTION

GENERATOR CHECKLIST

GENERATOR REQUIREMENTS

A. BDAT Treatability Group - Treatment Standards Identification

No F-Wastes

1. F-Solvent Wastes: Does the generator correctly determine the appropriate treatability group of the waste?

Handled

_____ Yes _____ No _____ NA

If yes, check the appropriate treatability group.

- _____ Wastewaters containing solvents (less than or equal to 1% TOC by weight)
_____ Pharmaceutical wastewater containing spent methylene chloride
_____ All other spent solvent wastes

2. California List Wastes: Does the generator correctly determine the appropriate treatment standard of the waste?

- a. For liquid hazardous waste that contains PCBs at concentrations greater than or equal to 50 but less than 500 ppm, is the treatment in accordance with existing TSCA thermal treatment regulations for burning in high efficiency boilers (40 CFR 761.60) or incineration (40 CFR 761.70)?

No P.C.B's

Handled

_____ Yes _____ No _____ NA

If yes, specify the method: _____

- b. For liquid hazardous waste that contains PCBs at concentrations greater than or equal to 500 ppm, is the waste incinerated or disposed of by other approved alternate methods (40 CFR 761.60 (e))?

_____ Yes _____ No _____ NA

If yes, specify the method and state whether the facility has submitted a written request to the Regional Administrator or Assistant Administrator for an exemption from the incineration requirement:

B. Waste Analysis

1. F-Solvent Wastes

- a. Does the generator determine whether the F-solvent waste exceeds treatment standards?

_____ Yes _____ No _____ NA

No F. Wastes
Handled

How was this determination made?

- Knowledge of waste

_____ Yes _____ No

If yes, note how this is adequate: _____

- TCLP

_____ Yes _____ No

If yes, provide the date of last test, the frequency of testing, and note any problems. Attach test results.

- b. Does the F-solvent waste exceed applicable treatability group treatment standards upon generation [268.7(a)(2)]?

_____ Yes _____ No _____ NA

If yes, specify the waste stream: _____

- c. Does the generator dilute the F-solvent waste as a substitute for adequate treatment [268.3]?

_____ Yes _____ No _____ NA

- d. How does the generator test F-solvent waste when a process or waste stream changes?

2. California List Wastes

- a. Does the generator determine whether the waste is a liquid according to the Paint Filter Liquids Test (PFLT method 9095) as described by SW-846?

X Yes _____ No _____ NA

- b. If the waste is determined to be a liquid according to PFLT, is an absorbent added to the waste?

____ Yes X No ____ NA

What type of absorbent is used? _____
Check the types of waste to which absorbent is added.

____ Liquid hazardous waste having a pH less than or equal to 2

____ Liquid hazardous waste containing HOCs in concentrations greater than or equal to 1,000 mg/L, but less than 10,000 mg/L

____ Liquid hazardous waste containing metals

____ Liquid hazardous waste containing free cyanides

- c. Does the generator determine whether the concentration levels (not extract or filtrate) in the waste equal or exceed the prohibition levels or whether the waste has a pH of less than or equal to 2.0 based on:

- Knowledge of wastes

____ Yes ____ No ____ NA

If yes, note how this is adequate: _____

- Testing

X Yes ____ No ____ NA

If yes, list test method used: _____

- d. Does the generator determine if concentration levels in PFLT extract exceed cyanide and metals concentration levels?

X Yes ____ No ____ NA

- If yes, list test method used and constituent and concentration levels that exceeded prohibition levels: None exceeded
SW - 846

- e. Does the generator dilute the waste as a substitute for adequate treatment [268.3]?

____ Yes X No ____ NA

C. Management

1. On-Site Management

Is waste that exceeds the treatment standards treated, stored, or disposed on-site?

_____ Yes X No

If yes, the TSD Checklist must be completed.

2. Off-Site Management

- a. Does the generator ship any waste that exceeds the treatment standards to an off-site treatment or storage facility?

X Yes _____ No

If yes, does the generator provide notification to the treatment or storage facility [268.7(a)(1)]?

X Yes _____ No

If yes, does notification contain the following?

EPA Hazardous waste number(s) X Yes _____ No

Applicable treatment standards X Yes _____ No

Manifest number X Yes _____ No

Waste analysis data, if available X Yes _____ No

Identify off-site treatment or storage facilities: CID Processing
Calumet City, Illinois

- b. Does the generator ship any waste that meets the treatment standards to an off-site disposal facility?

_____ Yes X No

If yes, does the generator provide notification and certification to the disposal facility [268.7(a)(2)]?

_____ Yes _____ No

If yes, does notification contain the following?

EPA Hazardous waste number(s)	_____ Yes	_____ No
Applicable treatment standards	_____ Yes	_____ No
Manifest number	_____ Yes	_____ No
Waste analysis data, if available	_____ Yes	_____ No
Certification that the waste meets treatment standards	_____ Yes	_____ No

Identify off-site land disposal facilities: _____

- c. If the waste is subject to a nationwide variance (e.g., solvent-water mixtures less than 1%), extension (268.5), or petition (268.6), does the generator provide notification to the off-site disposal facility that the waste is exempt from land disposal restrictions [268.7(a)(3)]?

_____ Yes _____ No _____ NA

- D. Treatment Using RCRA 264/265 Exempt Units or Processes
 (i.e., boilers, furnaces, distillation units, wastewater treatment tanks, elementary neutralization, etc.)

None used here

Are treatment residuals generated from units or processes exempt under RCRA 264/265?

_____ Yes _____ No

If yes, list types of waste treatment units and processes:

NON-NOTIFICATION AND NON-FILER DISPOSITION JRM

0470055001

Notified

1. Non-Notifier X Non-Filer
2. U.S.E.P.A. ID Number for Non-Filers ILD099666935
3. Name of Facility: Luber-Finer Inc
 Facility Mailing Address: South 4th Street
Albion Illinois 62806
 City or Town State Zip Code
4. Location of Facility: South 4th Street
Albion Illinois
 City or Town State Zip Code
5. Facility Contact: Al Yelling, Plant Manager
 Name and Title
 Phone Number: 618/445-2395
 Area Code and Number
6. Type of Hazardous Waste Activity if Determined:
X Generation Transportation
 Treat/Store/Dispose (Circle Applicable Activities)
 Underground Injection
7. Description of State Follow-up Action (Including Name of State Assignee, File Data Reviewed, Person(s) Contacted by State, Date(s) and Type of Contact(s), and Information Obtained):
8. List of Significant Apparent Violations:
722.120, 722.134, 722.140, 722.141
9. List of Supporting Documents Attached:
I.S.S. Insp.

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TO BE COMPLETED BY ENFORCEMENT SECTION

10. Type of Enforcement Action Recommended: Site has been under investigation by State Law Enf. Dept. (Div. of Criminal Investigation). Decision expected by mid-March 1986 on whether criminal investigation will continue. If discontinued, enforcement correspondence will be sent.

11. Disposition Form Signed and Dated by State Enforcement Section:
317186 Bruce Carlson

NON-NOTIFICATION AND NON-FILER DISPOSTION FORM

1. Non-Notifier X Non-Filer _____

2. U.S.E.P.A. ID Number for Non-Filers _____

3. Name of Facility: Luber - Finer

Facility Mailing Address: South 4th Street

Albion Illinois 62806
City or Town State Zip Code

4. Location of Facility: South 4th Street

Albion Illinois
City or Town State Zip Code

5. Facility Contact: Al Yelling, Plant Manager
Name and Title

Phone Number: 618/445-2395
Area Code and Number

6. Type of Hazardous Waste Activity if Determined:

X Generation _____ Transportation

_____ Treat/Store/Dispose (Circle Applicable Activities)

_____ Underground Injection

7. Description of State Follow-up Action (Including Name of State Assignee, File Data Reviewed, Person(s) Contacted by State, Date(s) and Type of Contact(s), and Information Obtained):

8. List of Significant Apparent Violations:

722.120, 722.134, 722.140, 722.141

9. List of Supporting Documents Attached:

I.S.S. Insp.

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11. Disposition Form Signed and Dated by State Enforcement Section:

3/17/86

Bruce Carlson

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Illinois Environmental Protection Agency · 2200 Churchill Road, Springfield, IL 62706

217-782-5544

March 7, 1986

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MAR 13 1986

Ms. Jodi Traub
Waste Management Division
U.S.EPA Region V
230 South Dearborn St.
Chicago, IL 60606

U.S. EPA, REGION V
WASTE MANAGEMENT DIVISION
HAZARDOUS WASTE ENFORCEMENT BRANCH

Re: Non-Notification/Non-Filer Reports

Dear Jodi:

Enclosed please find completed a non-notification and non-filer disposition form, with attachments, for the following facilities:

Luber-Finer/Albion, Edwards County, Illinois
(LPC 0470055001); and

Champion Laboratories, Inc./Albion, Edwards County, Illinois
(LPC 1470050002).

If, after follow up by this Agency, these facilities have not achieved compliance, we will refer the violations for enforcement.

Sincerely yours,

Bruce Carlson
Staff Attorney
Enforcement Programs
Division of Land Pollution Control

cc: FOS/DLPC, Collinsville Regional Office
Records Unit/DLPC
Gary King, Enforcement Programs

Enclosures



DATE: September 19, 1985

TO: Land Division File

FROM: G. E. Steele - DLPC/FOS - Southern Region - Marion *ges*

SUBJECT: 0470055001 - Edwards County - Albion/Luber-Finer
(Federal Non-Notifier) - I.S.S. Follow-Up Inspection

An I.S.S. follow-up inspection of the Luber-Finer manufacturing plant was conducted on September 19, 1985 by this author. Luber-Finer is a division of Champion Laboratories, Inc. An I.S.S. inspection of Champion Labs was conducted on November 7, 1984, which involved three divisions separate plants all located in Albion. The Pyroil and Champion Divisions plants are adjacent to each other. The Luber-Finer plant is several hundred yards south. No contiguous property lines exist between the two locations. Champion Labs recently started treating Luber-Finer as a separate facility with respect to wastes. The current classification of Luber-Finer is as a non-notifying generator. They manufacture replaceable element filters. During this visit, I met with Mr. Al Yelling of Luber-Finer, and Mr. Richard Baumgart and Ms. Mary K. Smerdon of Champion Labs.

Incoming metal parts are subjected to a hot acid cleaning. A phosphoric acid solution is used. Some parts are subjected to an alternative sodium hydroxide wash. These baths are only changed once a year. Approximately 1400 gallons of waste phosphoric acid is generated, with the caustic bath adding another approximate 200 gallons. The last cleaning was done "sometime between Christmas and New Years." The two wastes are combined into one tank truck for neutralization. Mr. Yelling stated that the waste from the last cleaning was hauled to the disposal well by Johnson and Briggs. No manifests were used. Separate

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analysis sheets were on-site for these two wastes. The analysis for the acid dip, dated 10-15-85, shows a pH of 3.4, and E.P. Toxic metals levels of cadmium at 4.1 ppm and chromium at 10 ppm. An analysis of the caustic dip, dated 03-20-85, shows a pH of 13.3, and a chromium level of 56 ppm. I asked Mr. Baumgart if any testing had been done to identify the chromium as trivalent or hexavalent. He stated there had not. I informed them that the analysis showed that both wastes were classified as hazardous. At this time, Mr. Yelling made comments to the effect that when they cleaned out these tanks again they would have to arrange for appropriate disposal. He also made the comment the useful life of the process was questionable, as the parts dipped were about to be declared obsolete.

They also generate some waste trichloroethane during once a year cleaning of their vapor degreaser. In 1984, this material was recycled through Rend Lake Chemical. This year, the material was transported to Pyroil, where it was used as raw material. Trichloroethane is a component of their brake parts cleaner product. Luber-Finer also has Safety Kleen parts washers. This is serviced once every three weeks, resulting in approximately 30 gallons of used solvent. Manifests have been used for transporting these solvents only since August of 1985.

A contingency plan has been drawn up for this plant. No listing or description of emergency equipment is shown in the plan even though this equipment is available. No evacuation routes are shown. No written arrangements with local emergency response teams are contained in the plan. The plan has not been submitted to these teams. Very few of the personnel training requirements were met.

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September 19, 1985

The only personnel training with regard to hazardous wastes is Right-To-Know training on the products. A main component of the R.T.K. training is the use of material safety data sheets. One hourly employee is involved in handling hazardous waste.

No tour of the plant was taken on this date.

GLS:br
10/2/85

cc: Land Southern Region

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II. BRIEFLY DESCRIBE SITE ACTIVITY

This facility manufactures replaceable element filters. Initially, they were treated as a part of the Champion Labs facility. This plant is located on a separate nearby location. They have recently been treated as a separate site. Their hazardous wastes include waste acid dip, waste caustic dip, and waste solvents.

III. MANIFEST REQUIREMENTS (Subpart B)

	Yes	No	NI*	Remarks
(A) Does the operator have copies of the manifest available for review?	—	<u>X</u>	—	<u>See Comment A</u>
(B) Do the manifest forms reviewed contain the following information? (If possible, make copies of, or record information from, manifests that do not contain the critical elements)				
1. Manifest document number?	<u>X</u>	—	<u>/</u>	
2. Name, mailing address, telephone number, and EPA ID number of generator?	<u>X</u>	—	—	
3. Name and EPA ID Number of transporter(s)?	<u>X</u>	—	—	
4. Name, Address, and EPA ID Number of designated permitted facility and alternate facility?	<u>X</u>	—	—	

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	Yes	No	NI*	Remarks
5. The description of the waste(s) (DOT shipping name, DOT hazard class, DOT identification number)?	<u>X</u>	<u> </u>	<u> </u>	<u> </u>
6. The total quantity of waste(s) and the type and number of containers loaded?	<u>X</u>	<u> </u>	<u> </u>	<u> </u>
7. Required certification?	<u>X</u>	<u> </u>	<u> </u>	<u> </u>
8. Required signatures?	<u>X</u>	<u> </u>	<u> </u>	<u> </u>
(C) Does the owner or operator submit exception reports when needed?	<u> </u>	<u> </u>	<u>X</u>	<u>Non-Needed</u>

IV. PRE-TRANSPORT REQUIREMENTS

(A) Is waste packaged in accordance with DOT regulations? (Required prior to movement of hazardous waste off-site)	<u> </u>	<u> </u>	<u>X</u>	<u>See Comment (B)</u>
(B) Are waste packages marked and labeled in accordance with DOT regulations concerning hazardous waste materials? (Required prior to movement of hazardous waste off-site)	<u> </u>	<u> </u>	<u>X</u>	<u> </u>
(C) If required, are placards available to transporter?	<u> </u>	<u> </u>	<u>X</u>	<u> </u>
(D) Pre-shipment Accumulation:				
1. Are containers marked with start of accumulation date?	<u> </u>	<u> </u>	<u>X</u>	<u> </u>
2. Are the containers of hazardous waste removed from installation before they can accumulate for more than 90 days?	<u> </u>	<u> </u>	<u>X</u>	<u> </u>

*Not Inspected

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	Yes	No	NI*	Remarks
3. Are wastes stored in containers managed in accordance with 40 CFR Part 265.174 and 265.176 (weekly inspections of containers, containers holding ignitable or reactive wastes located at least 15 meters (50 feet) from facility's property line)?	—	—	x	containers not used
4. If wastes are stored in tanks, are the tanks managed according to the following requirements:				
a. Are tanks used to store only those wastes which will not cause corrosion leakage or premature failure of the tank?	—	—	x	Production tanks = waste tanks
b. Do uncovered tanks have at least 60 cm (2 feet) of freeboard, dikes, or other containment structures?	—	—	x	
c. Do continuous feed systems have a waste-feed cutoff?	—	—	x	
d. Are required daily and weekly inspections done?	—	—	x	
e. Are reactive and ignitable wastes in tanks protected from sources of reaction and ignition, or rendered non-reactive or non-ignitable? Indicate if waste is ignitable or reactive. (If waste is rendered non-reactive or non-ignitable, see treatment requirements)	—	—	x	
f. Are incompatible wastes stored in separate tanks? (If not, the provisions of 40 CFR §265.17(b) apply)	—	—	x	
g. Has the owner or operator observed the National Fire Protection Association's buffer zone requirements for tanks containing ignitable or reactive wastes?	—	—	x	

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*Not Inspected

~~Record the following information:~~

~~Tank capacity? _____ gallons~~

~~Tank diameter? _____ feet~~

~~Distance of tank from property line? _____ feet~~

~~(see tables 2-1 through 2-6 of NEPA's "Flammable and
Combustible Liquids Code - 1977" to determine compliance)~~

V Training, Emergency Procedures

YES NO : NI* Remarks

A. Do Personnel training records
include: (Effective 5/19/81)

1. Job Titles?

— ☒ — See Comment (C)

2. Job Descriptions?

— ☒ — _____

3. Description of training?

— ☒ — _____

4. Records of training?

— ☒ — _____

5. Have facility personnel
received required train-
ing

— ☒ — _____

6. Do new personnel receive
required training within
six months?

— ☒ — _____

B. Preparedness and Prevention
(Part 265, Subpart C)

1. Maintenance and Operation
of Facility:

a. Is there any evidence of fire,
explosion, or release of
hazardous waste or hazardous
waste constituent?

— ☒ — _____

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*Not Inspected

2. If required, does this facility have the following equipment?

a. Internal communications or alarm systems?

X — — —

b. Telephone or 2-way Radios at the scene of operations?

X — — —

c. Portable fire extinguishers, fire control, spill control equipment and decontamination equipment?

X — — —

Indicate the volume of water and/or foam available for fire control

3. Testing and Maintenance of Emergency Equipment:

a. Has the owner or operator established testing and maintenance procedures for emergency equipment?

X — — —

b. Is emergency equipment maintained in operable condition?

X — — —

4. Has owner/operator provided immediate access to internal alarms (if needed)?

X — — —

5. Is there adequate aisle space for unobstructed movement?

X — — —

C. Contingency Plan and Emergency Procedure (Part 265, Subpart D)

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*Not Inspected

1. Does the contingency plan contain the following:

a. The actions facility personnel must take to comply with §265.51 and 265.56 in response to fires, explosions, or any unplanned release of hazardous waste? (If the owner has a Spill Prevention, Control and Countermeasures (SPCC) Plan, he needs only to amend that plan to incorporate hazardous waste management provisions that are sufficient to comply with the requirements of this Part as applicable)

X

b. Arrangements agreed to by local police departments, fire departments, hospitals, contractors, and State and local emergency response teams to coordinate emergency services, pursuant to §265.37?

X

c. Names, addresses, and phone numbers (Office and Home) of all persons qualified to act as emergency coordinator.

X

d. A list of all emergency equipment at the facility which includes the location and physical description of each item on the list, and a brief outline of its capabilities?

X

e. An evacuation plan for facility personnel where there is a possibility that evacuation could be necessary? (This plan must describe signal(s) to be used to begin evacuation, evacuation routes and alternate evacuation routes.

X

2. Are copies of the Contingency Plan available at site and local emergency organizations?

 X

3. Emergency Coordinator

a. Is the facility emergency Coordinator identified?

 X

b. Is coordinator familiar with all aspects of site operation and emergency procedures?

 X

c. Does the Emergency Coordinator have the authority to carry out the Contingency Plan?

 X

4. Emergency

If an emergency situation has occurred at this facility, has the emergency coordinator followed the emergency procedures listed in §265.56?

 X None has occurred

VI. RECORDKEEPING AND REPORTING
(Part 262, Subpart D)

(A) Are Manifests, Annual Reports, Exception Reports, and all test results and analyses retained for at least three years?

 X

See Comment (D)

(B) Has the generator submitted Annual Reports and Exception Reports as required?

 X

See Comment (D)

VII. INTERNATIONAL SHIPMENTS
(Part 262 Subpart E)

(A) Has the installation imported or exported hazardous waste?

 X

Not Inspected

(If A was answered Yes, then complete the following as applicable.)

1. Exporting Hazardous waste, has a generator:
 - a. Notified the Administrator in writing? _____
 - b. Obtained the signature of the foreign consignee confirming delivery of the waste(s) in the foreign country? _____
 - c. Met the Manifest requirements? _____
2. Importing Hazardous Waste, has the generator: _____
 Met the manifest requirements? _____

VIII. Remarks

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REMARKS: Comment (A) This facility just began using manifests during August of 1985,

and then only for their used Safety Kleen solvents. Two other hazardous waste streams are handled without the benefits of manifests.

Comment (B) Luber-Firers wastes include spent acid dip, spent caustic dip, Safety Kleen solvents, and used trichloroethane. The dip tanks are cleaned once a year, with the waste being pumped directly from the tanks to a tank truck. Safety Kleen parts washers are serviced regularly, with the solvent being taken directly from the washers and placed into venders containers. Used trichlor is generated only when their degreaser is cleaned. This occurs only once about every 18 months. This solvent is taken to Pryoil, where it is used as raw material.

Comment (C) The only personnel training provided on the wastes is Right-To-Know training on the materials as products. Material safety data sheets are a major component of this training.

Comment (D) - They just started using manifests in August, 1985, and then not for all wastes

04700055001 Edwards County - Albion/Luber-Firer

which required them. No Annual Reports are submitted. Analysis results on hand were generated within the last twelve months.

GES:bt

10/15/85

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